2007-011396 Klamath County, Oregon



06/26/2007 09:24:22 AM

Fee: \$41.00

ALL TRANSACTIONS, ORS: 205.234

This cover sheet has been prepared by the person Presenting the attached instrument for recording. Any errors in this cover sheet DO NOT affect the Transaction(s) contained in the instrument itself.

THIS SPACE RESERVED FOR COUNTY RECORDING USE ONLY

AFTER RECORDING RETURN TO:

Wells Fargo Bank, N.A. P.O. Box 31557 MAC B6955-015 Billings, MT 59107-9900

PRINT or TYPE ALL INFORMATION

The date of this Short Form Line of Credit Deed of Trust ("Security Is	nstrument") is MAY 29, 2007
1) NAME(S) OF THE TRANSACTION(S) required by ORS 2 Short Form Line of Credit Deed of Trust	05.234(a)
2) DIRECT PARTY / GRANTOR, required by ORS 205.125(1)(b) and ORS 205.160
STANLEY P HAMPTON	SHIRLEY A HAMPTON
3) INDIRECT PARTY / GRANTEE, required by ORS 205.125 Wells Fargo Bank, N.A.	6(1)(b) and ORS 205.160
4) TRUSTEE NAME and ADDRESS Wells Fargo Financial National Bank, c/o Specialized	Services, PO Box 31557 Billings, MT 59107
5) All TAX STATEMENTS SHALL BE SENT TO THE	FOLLOWING ADDRESS:
STANLEY P HAMPTON , 24000 DUSTY WAY, PION 6) TRUE and ACTUAL CONSIDERATION (if any), ORS 93.0 \$46,690.00	
7) FULL OR PARTIAL SATISFACTION ORDER or WARRA ORS 205.121(1)(e)	ANT FILED IN THE COUNTY CLERKS LEIN RECORDS,
8) THE AMOUNT OF THE CIVIL PENALTY or THE AMOU CHARGES FOR WHICH THE WARRANT< ORDER OR JUDG	INT, INCLUDING PENALTIES, INTEREST AND OTHER MENT WAS ISSUED. ORS 205.125(1)(c) and ORS 18.325
9) Rerecarded to correct	

ORDEED-short, CDP.V1 (06/2002)

Previously recorded as

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Documents Processed 05-29-2007, 13:40:37

Until a change is requested, all tax statements shall be sent to the following address: STANLEY P HAMPTON 24000 DUSTY WAY PIONEER, CALIFORNIA 95666

Prepared by: Wells Fargo Bank, N.A. MAGGIE JONES DOCUMENT PREPARATION 11601 N BLACK CANYON HWY PHOENIX, ARIZONA 85029 866-537-8489

Return Address: Wells Fargo Bank, N.A. P.O. Box 31557 MAC B6955-015 Billings, MT 59107-9900

TAX ACCOUNT NUMBER R-3909-007CB-03500-000

REFERENCE #: 20071417100158

-Space Above This Line For Recording Data
Account number: 651-651-1697150-1XXX

SHORT FORM LINE OF CREDIT DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Form Line of Credit Deed of Trust ("Security Instrument") is MAY 29, 2007 and the parties are as follows:

TRUSTOR ("Grantor"): STANLEY P. HAMPTON AND SHIRLEY A HAMPTON, WHO ACQUIRED TITLE AS, SHIRLEY A. FORRESTER, HUSBAND AND WIFE

whose address is: 24000 DUSTY WAY, PIONEER, CALIFORNIA 95666

TRUSTEE: Wells Fargo Financial National Bank, c/o Specialized Services, PO Box 31557 Billings, MT 59107

BENEFICIARY ("Lender"): Wells Fargo Bank, N.A., 101 North Phillips Avenue, Sioux Falls, SD 57104

2. CONVEYANCE. For good and valuable consideration, the receipt and sufficiency of which is acknowledged, and to secure the Secured Debt (defined below) and Grantor's performance under this Security Instrument, Grantor irrevocably grants, conveys and sells to Trustee, in trust for the benefit of Lender, with power of sale, all of that certain real property located in the County of <u>KLAMATH</u>, State of Oregon, described as follows: LOT 3 BLOCK 8 STEWART ADDITION, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON.

with the address of <u>4647 DOUGLAS AVE, KLAMATH FALLS, OREGON 97601</u> and parcel number of <u>R-3909-007CB-03500-000</u>, together with all rights, easements, appurtenances, royalties, mineral rights, oil and

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gas rights, all water and riparian rights, ditches, and water stock and all existing and future improvements, structures, fixtures, and replacements that may now, or at any time in the future, be part of the real estate described above.

- 3. MAXIMUM OBLIGATION AND SECURED DEBT. The total amount which this Security Instrument will secure shall not exceed \$ 46,690.00 together with all interest thereby accruing, as set forth in the promissory note, revolving line of credit agreement, contract, guaranty or other evidence of debt ("Secured Debt") of even date herewith, and all amendments, extensions, modifications, renewals or other documents which are incorporated by reference into this Security Instrument, now or in the future. The maturity date of the Secured Debt is MAY 29, 2047.
- 4. MASTER FORM LINE OF CREDIT DEED OF TRUST. By the delivery and execution of this Security Instrument, Grantor agrees that all provisions and sections of the Master Form Line of Credit Deed of Trust ("Master Form"), inclusive, dated February 1, 1997 and recorded on 2/10/1997 as Instrument Number 32645 in Book M 97 at Page 4115 of the Official Records in the Office of the Recorder of KLAMATH County, State of Oregon, are hereby incorporated into, and shall govern, this Security Instrument.

	n Book M 97 at Page 4115 of the Official Records in the Office of the Recorder of KLAMATH (f Oregon, are hereby incorporated into, and shall govern, this Security Instrument.	County, State
5.	AIDERS. If checked, the following are applicable to this Security Instrument. The covenants and a ach of the riders checked below are incorporated into and supplement and amend the terms of astrument. N/A Third Party Rider	greements of this Security
	N/A Third Party Rider N/A Leasehold Rider N/A Other: N/A	
mst	ATURES: By signing below, Grantor agrees to perform all covenants and duties as set forth in nent. Grantor also acknowledges receipt of a copy of this document and a copy of the provisions eviously recorded Master Form (the Deed of Trust-Bank/Customer Copy).	this Security contained in
	Stanley Ptanytan 6-9	/-07 Date
Gra	Shirley A Hampton 6-	<u>4-07</u> Date
Cana		
Grai		Date
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California Notary Acknowledgment

State of California	
County of Amader	
On June 4th 2007	before me,
Sarah M. Duarte, Notary Public (insert name and title of the officer here)	
personally appeared Stantey P Hampton, Shirl	ey A. Han
personally knewn to me. (or proved to me on the basis of satisfactory be the person(s) whose name(s) is/are subscribed to the within instruction in the same in his/her/they executed the same in his/her/theirsignature(s) on the authorized capacity(ies), and that by his/her/their signature(s) on the he person(s), or the entity upon behalf of which the person(s) acted, he instrument.	ument and their
VITNESS my hand and official seal.	
signature Jack M Duarte	(Seal)
SARAH M. D. Commission # Notary Public - Amador Co My Comm. Expires	1641994 (California SA